

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Steven B King
4073 Shell Rd.
Sarasota, FL
34242

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*☒ Agent☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

2-3-3

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☒ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 0460 0002 7099 4011

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-0835

FILED
HARRISBURG, PA

FEB 10 2003

MARY E. D'ANDREA, CLERK

Per 9/8

1-(V-01-1117

Judgment